

## IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12<sup>TH</sup>, SUITE 1A  
 DES MOINES, IA 50319  
 Fax: (515)281-4073  
 www.iowa.gov/ethics

2008 JUN -2 AM 11:13

Reset Form

## FORM-GBG

Gift, Bequest, or Grant information  
 received by a department or  
 accepted by the Governor on behalf  
 of the state

## For office use only

Indexed \_\_\_\_\_  
 Audited \_\_\_\_\_  
 Checked \_\_\_\_\_  
 Computer \_\_\_\_\_

Iowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

## DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUEST, OR GRANT:

Newton Correctional Facility	
Name of Department or Office	
PO Box 218	Newton, IA 50208
Mailing Address	City, State, Zip Code
641-792-7552 x411	
Area Code & Telephone No.	

## CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Terry Mapes	
Name	
PO Box 218	Newton, IA 50208
Mailing Address (if different from above)	City, State, Zip (if different from above)
terry.mapes@iowa.gov	641-792-7552 x 411
Email Address	Area Code & Telephone Number (if different from above)

## DONOR OF GIFT, BEQUEST, OR GRANT:

Jean Chagnon	
Name	
14210 SW 122 Court	Miami, FL 33186-6028
Mailing Address	City, State, Zip Code
Unknown	
Area Code & Telephone Number	
Unknown	
Email Address (optional)	

5-12-08	\$ 37.19
Date of Gift, Bequest, or Grant	Amount/Value*
*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".	

Provide a description of the gift, bequest, or grant and purpose thereof:

24 hand trowels for use in flower beds maintained by offenders.

Criteria to use this form:

Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state.

## Statement of Affirmation:

I, Dan Craig affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

Signature

Date

5-26-08

**IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD**  
 IA ETHICS AND CAMPAIGN DISCLOSURE BOARD  
 510 EAST 12<sup>TH</sup>, SUITE 1A  
 DES MOINES, IA 50319  
 Fax: (515)281-3701  
 www.iowa.gov/ethics

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**DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUEST, OR GRANT:**

Fort Dodge Correctional Facility	
Name of Department or Office 1550 L Street	Fort Dodge, Iowa 50501
Mailing Address 515-574-4700	City, State, Zip Code
Area Code & Telephone No.	

**CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:**

Cornell R. Smith	
Name Same	Same
Mailing Address (if different from above) Cornell.Smith@iowa.gov	City, State, Zip (if different from above) 515-574-4711
Email Address	Area Code & Telephone Number (if different from above)

**DONOR OF GIFT, BEQUEST, OR GRANT:**

AVP/Iowa	
Name Box 313	Grinnell, Iowa 50112
Mailing Address 641-990-1199	City, State, Zip Code
Area Code & Telephone Number	
Email Address (optional)	

May 19, 2008	\$ 46.50
Date of Gift, Bequest, or Grant	Amount/Value*
*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".	

Provide a description of the gift, bequest, or grant and purpose thereof:

Alternative to Violence Project workbook/manual - 3 Introductory Course and 2 Second Level Course to be used by offenders during the Alternative to Violence Project workshops.

Criteria to use this form:

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**Statement of Affirmation:**

I, Dan Craig affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

Signature

Date

5-16-08

## IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

IA ETHICS AND CAMPAIGN DISCLOSURE BOARD  
1510 EAST 12<sup>TH</sup>, SUITE 1A  
DES MOINES, IA 50319

Fax: (515)281-3701

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## DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUEST, OR GRANT:

Fort Dodge Correctional Facility	
Name of Department or Office 1550 L Street	Fort Dodge, Iowa 50501
Mailing Address 515-574-4700	City, State, Zip Code
Area Code & Telephone No.	

## CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Cornell R. Smith	
Name Same	Same
Mailing Address (if different from above) Cornell.Smith@iowa.gov	City, State, Zip (if different from above) 515-574-4711
Email Address	Area Code & Telephone Number (if different from above)

## DONOR OF GIFT, BEQUEST, OR GRANT:

Church of the Damascus Road	
Name	
239 North 11th Street, P.O. Box 834	Fort Dodge, Iowa 50501
Mailing Address	City, State, Zip Code
515-955-3579	
Area Code & Telephone Number	
Email Address (optional)	

May 18, 2008	\$ 200.00
Date of Gift, Bequest, or Grant	Amount/Value*
*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".	

Provide a description of the gift, bequest, or grant and purpose thereof:

200 Quarterly issues of Our Daily Bread devotional booklets to be used by offenders during religious services.

Criteria to use this form:

Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state.

## Statement of Affirmation:

I, Don Craig affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

Signature

Date

5-26-08